



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E370620**

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input checked="" type="checkbox"/>	HIT & RUN INVOLVED <input checked="" type="checkbox"/>

TRIBAL RESERVATION ☐

CASE # **14-02759**

LOCAL AGENCY CODING

TOTAL # OF UNITS **02** OBJECT STRUCK

M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #
DATE OF COLLISION **11** - **02** - **2014** **1513** **31** N ☐ E ☐ IN ☒ **0664**
S ☐ W ☐ OF

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒
303 BLOCK NO. ☒ **300**
MILE POST

DISTANCE OF (REFERENCE OR CROSS STREET)
30 **00** MILES ☐ N ☒ E ☒
FEET ☒ S ☐ W **91 AVE N.E.**

UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☐ NO ☒ PHONE

LAST NAME **UNKNOWN** FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS

CITY ST ZIP

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # STATE SEX **U** D.O.B. MMDDYYYY - -

ON DUTY ☐ STATUS AIRBAG **9** RESTR. **9** EJECT **9** HELMET USE **9** INJURY CLASS **0** NATURE OF INJURIES

LICENSE PLATE # STATE VIN#

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR MAKE MODEL STYLE **VN** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. VEHICLE NO. 1 SHADE IN DAMAGED AREA

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # CITATION # CHARGE

VEHICLE LEGALLY STANDING YES ☐ NO ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE

UNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE

LAST NAME **UNKNOWN** FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS

CITY ST ZIP

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # STATE SEX **U** D.O.B. MMDDYYYY - -

ON DUTY ☐ STATUS AIRBAG **9** RESTR. **9** EJECT **9** HELMET USE **9** INJURY CLASS **0** NATURE OF INJURIES

LICENSE PLATE # **ARE7731** STATE **WA** VIN# **1FAFP53U23G140425**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2003** MAKE **FORD** MODEL **TAURUS** STYLE **P4** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **JEANNINE FOSCA 9021 19 PL. S.E. LAKE STEVENS WA 98258 D: 425237656** VEHICLE NO. 2 SHADE IN DAMAGED AREA

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **UNK UNK** CITATION # CHARGE

VEHICLE LEGALLY STANDING YES ☐ NO ☐ OFFICER'S NAME (PRINT) **RON BROOKS** BADGE OR ID # **013** AGENCY **WA0311900**



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E370620**

CASE #

14-02759

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME

(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NAME

(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NAME

(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT
POS.

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

NARRATIVE

Unit 1 backed into Unit 2 in the Taco Bell parking lot. Unit 2 was parked unoccupied. The driver of Unit 1 fled the scene with out leaving any information on Unit 2. The Owner of Unit 2 was able to get a partial license plate of B45???. He described the running vehicle as a white, van with a white male driver. There is no suspect infromation at this time.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

RON BROOKS

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

11-03-14 11:37 AM

DATED

PLACE SIGNED

APPROVED BY

RON BROOKS 013

DATE

11/3/2014 11:42:01 AM

BADGE OR ID #

013

ORI #

WA0311900

TIME POLICE DISPATCHED

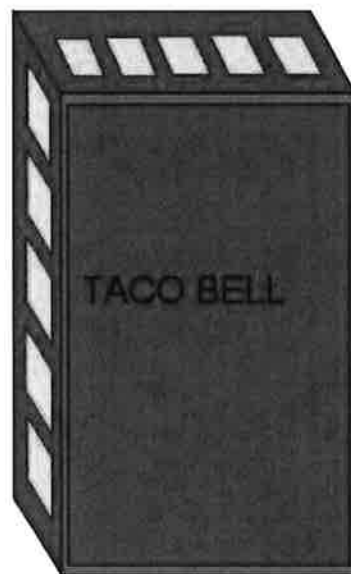
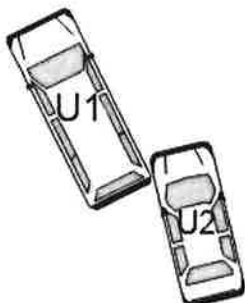
3:20 PM

TIME POLICE ARRIVED

3:35 PM



DID NOT OBSERVE SCENE



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 14-02759



VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Attipoe, Amado, Elam	RACE Bi	ETH	SEX M	DOB 03/17/1998	AGE 16	HGT 5'11"	WGT 170	HAIR Blk	EYES Brn
STREET ADDRESS 9021 14th PL SE		CITY Lake Stevens		STATE WA		ZIP 98258		RES. STATUS		
HOME PHONE		CELL PHONE 425-583-9162			PLACE OF EMPLOYMENT King Charley's					
WORK PHONE		EMAIL ADDRESS elamattip@gmail.com								

I, Amado Attipoe, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

On 11-1-14 at about 7:30pm I had parked in the Taco Bell parking lot & then went into Taco Bell. After returning to my car I was preparing to leave with my friends; the white van parked in front & to the left of us began backing up & continued until he hit my car; the van scraped against my car for a few seconds before pulling out & leaving. The license plate number of the van was B45797. The driver was an adult white male.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 11-2-14	LOCATION SIGNED 9021 14th PL SE Lake Stevens WA 98258
OFFICER/NUMBER: 	DATE SIGNED 11	LOCATION SIGNED 11

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ___ OF ___

Incident History for: #SS14021814

Case Numbers: \$SS14002759

Entered 11/02/14 15:13:57 BY SPCT06 SP0294
Dispatched 11/02/14 15:20:47 BY SPDP17 SP0326
Enroute 11/02/14 15:20:47
Onscene 11/02/14 15:35:06
Closed 11/02/14 16:28:21

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 3 Dispo: H

Police BLK: SS002 Fire BLK: AG1518 Map Page: 397E-1 Group: SS1 Beat: WEST

Src: T

Loc: 303 91 AV NE , LKS -- TACO BELL , LKS btwn MARKET PL & SR 204 (V)

Loc Info:

Name: FOSCA, JEANENE Addr: 9021 19 PL SE, LKS Phone: 4259237656

/1513 (SP0294) ENTRY , CC RP ADDR, COLD, HIT AND RUN
/1514 (SP0326) VIEWED
/1514 CHANGE PRI: 2
---> 3 .
, PER TEXT

/1520 AGCADV
/1520 DISPER 19D3 [9021 19 PL SE]
#SS120 BERNHARD, OFFICER (KERRY)

/1535 (SS120) *ONSCNE 19D3
/1537 (SP0326) \$PREMPT 19D3
/1614 DISPER 19S10 #SS13 BROOKS, SGT (RON)
/1624 (SP0346) ONSCNE 19S10
/1624 ASNCAS 19S10 \$SS14002759
/1628 (SP0326) CLEAR 19S10 D/H
/1628 CLOSE 19S10